



We also enclose a check for the required fee of \$180.00 to cover the Information Disclosure Statement under 37 C.F.R. 1.97(c)(2).

Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



---

Peter Saxon  
Attorney for Applicants  
Registration No.: 24,947

FITZPATRICK, CELLA, HARPER & SCINTO  
30 Rockefeller Plaza  
New York, New York 10112-3800  
Facsimile: (212) 218-2200  
NY\_593027v1

FORM PTO 1449 (modified)				ATTY DOCKET NO. 03560.003435		APPLICATION NO. 10/808,401	
U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE				APPLICANT <b>KEIJI KOMOTO</b>			
LIST OF REFERENCES CITED BY APPLICANT(S) (Use several sheets if necessary)				FILING DATE <b>March 25, 2004</b>		GROUP <b>1756</b>	
U.S. PATENT DOCUMENTS							
*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
		<b>6,638,674</b>	<b>10/2003</b>	<b>Komoto et al.</b>	<b>430</b>	<b>106.100</b>	<b>7/2001</b>